

## Trustee's Final Report

In Re: PAUL J. WITT & LYNN A. WITT  
8414 RUSSELL STREET  
CARY, IL 60013Case Number: 08-72240  
SSN-xxx-xx-8431 & xxx-xx-9215Case filed on:  
Plan Confirmed on:  
7/17/2008

X Converted Unconfirmed

Total funds received and disbursed pursuant to the plan: \$0.00 Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
000	BOHLMAN LAW OFFICES, P.C.	0.00	0.00	0.00	0.00
	Total Legal	0.00	0.00	0.00	0.00
025	PAUL J. WITT	0.00	0.00	0.00	0.00
	Total Debtor Refund	0.00	0.00	0.00	0.00
001	AMC	20,000.00	20,000.00	0.00	0.00
	Total Secured	20,000.00	20,000.00	0.00	0.00
002	CAP 1 BANK	0.00	0.00	0.00	0.00
003	CENTEGRA	0.00	0.00	0.00	0.00
004	CENTEGRA	0.00	0.00	0.00	0.00
005	CRDTONEBNK	0.00	0.00	0.00	0.00
006	CREDITORS COLLECTION BUREAU	1,088.37	43.53	0.00	0.00
007	CREDITORS INTERCHANGE	0.00	0.00	0.00	0.00
008	EXXON MOBIL	0.00	0.00	0.00	0.00
009	PREMIER BANKCARD/CHARTER	310.82	12.43	0.00	0.00
010	PREMIER BANKCARD/CHARTER	333.20	13.33	0.00	0.00
011	GEMB/EXXON	0.00	0.00	0.00	0.00
012	H & R ACCOUNTS	0.00	0.00	0.00	0.00
013	HARRIS & HARRIS, LTD	0.00	0.00	0.00	0.00
014	HARVARD COLLECTION	0.00	0.00	0.00	0.00
015	HARVARD COLLECTIONS	0.00	0.00	0.00	0.00
016	HFC	0.00	0.00	0.00	0.00
017	HSBC NV	0.00	0.00	0.00	0.00
018	ILLINOIS PAIN CENTER	0.00	0.00	0.00	0.00
019	NORTH SHORE ONCOLOGY	0.00	0.00	0.00	0.00
020	NORTHERN ILLINOIS MEDICAL CENTER	2,240.13	89.61	0.00	0.00
021	PROVENA MERCY MEDICAL	0.00	0.00	0.00	0.00
022	SURGICAL ASSOC OF FOX VALLEY	0.00	0.00	0.00	0.00
023	TOYOTA	0.00	0.00	0.00	0.00
024	TOYOTA MTR	0.00	0.00	0.00	0.00
	Total Unsecured	3,972.52	158.90	0.00	0.00
	Grand Total:	23,972.52	20,158.90	0.00	0.00

Total Paid Claimant: \$0.00  
Trustee Allowance: \$0.00  
Percent Paid Unsecured: 0.00

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer  
Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 09/26/2008By /s/Heather M. Fagan